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FAX TRANSMISSION**DATE:** December 15, 2005**PTO IDENTIFIER:** Application Number 10/632,519
Patent Number**Inventor:** Youssri Helmy et al.**MESSAGE TO:** US Patent and Trademark Office**FAX NUMBER:** (571) 273-8300**FROM:** DARBY & DARBY P.C.

John W. Branch

PHONE: (206) 262-8900**Attorney Dkt. #:** 08204/0203518-USO/10.156**PAGES (Including Cover Sheet):** 17**CONTENTS:** Request for Continued Examination Transmittal (1 page)
Fcc Transmittal (1 page)
Three Month Request for Extension of Time Under 37 CFR 1.136(a) (1 page)
Amendment (12 pages)
Certificate of Transmission (1 page)**Charge \$2,610.00 to deposit account 04-0100**

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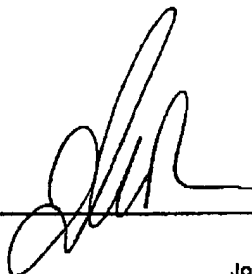
Application No. (if known): 10/632,519

Attorney Docket No.: 08204/0203518-US0/10.156

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Request for Continued Examination Transmittal (1 page)

Fee Transmittal (1 page)

Three Month Request for Extension of Time Under 37 CFR 1.136(a)

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Amendment (12 pages)

Fax Cover Sheet (1 page)

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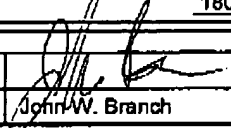
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| Effective on 12/08/2004. Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). FEE TRANSMITTAL For FY 2005 | | Complete if Known Application Number 10/632,519 Filing Date August 1, 2003 First Named Inventor Youssri Helmy Examiner Name A. Elallam Art Unit 2662 Attorney Docket No. 08204/0203518-US0/10.156 | |
| <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27 | | | |
| TOTAL AMOUNT OF PAYMENT (\$) 2,610.00 | | | |

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| METHOD OF PAYMENT (check all that apply) <input type="checkbox"/> Check <input type="checkbox"/> Credit Card <input type="checkbox"/> Money Order <input type="checkbox"/> None <input type="checkbox"/> Other (please identify): _____ <input checked="" type="checkbox"/> Deposit Account Deposit Account Number: 04-0100 Deposit Account Name: Darby & Darby P.C. For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input type="checkbox"/> Charge fee(s) indicated below, except for the filing fee <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 <input checked="" type="checkbox"/> Credit any overpayments | |
|---|--|

| FEE CALCULATION 1. BASIC FILING, SEARCH, AND EXAMINATION FEES | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
|--|--|--|------------------|---------------|-----------------------|---------|---|--------------|--------------|--|----------|---------------|-------|-------|---------|-------|-------|-------------|-----|-----|--|--|----------|-----------------------|-----|-----|-----|----|-----|-----|-----|-----|---|---|--|--|----------|-----------------------|-----|-----|-----|----|-----|----|-----|-----|---|---|--------------------------------|
| | FILING FEES <table border="1"> <thead> <tr> <th>Application Type</th> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>Utility</td><td>300</td><td>150</td></tr> <tr><td>Design</td><td>200</td><td>100</td></tr> <tr><td>Plant</td><td>200</td><td>100</td></tr> <tr><td>Reissue</td><td>300</td><td>150</td></tr> <tr><td>Provisional</td><td>200</td><td>100</td></tr> </tbody> </table> | | Application Type | Fee (\$) | Small Entity Fee (\$) | Utility | 300 | 150 | Design | 200 | 100 | Plant | 200 | 100 | Reissue | 300 | 150 | Provisional | 200 | 100 | SEARCH FEES <table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>500</td><td>250</td></tr> <tr><td>100</td><td>50</td></tr> <tr><td>300</td><td>150</td></tr> <tr><td>500</td><td>250</td></tr> <tr><td>0</td><td>0</td></tr> </tbody> </table> | | Fee (\$) | Small Entity Fee (\$) | 500 | 250 | 100 | 50 | 300 | 150 | 500 | 250 | 0 | 0 | EXAMINATION FEES <table border="1"> <thead> <tr> <th>Fee (\$)</th> <th>Small Entity Fee (\$)</th> </tr> </thead> <tbody> <tr><td>200</td><td>100</td></tr> <tr><td>130</td><td>65</td></tr> <tr><td>160</td><td>80</td></tr> <tr><td>600</td><td>300</td></tr> <tr><td>0</td><td>0</td></tr> </tbody> </table> | | Fee (\$) | Small Entity Fee (\$) | 200 | 100 | 130 | 65 | 160 | 80 | 600 | 300 | 0 | 0 | Fees Paid (\$) _____ |
| Application Type | Fee (\$) | Small Entity Fee (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Utility | 300 | 150 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Design | 200 | 100 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Plant | 200 | 100 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Reissue | 300 | 150 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Provisional | 200 | 100 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee (\$) | Small Entity Fee (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 500 | 250 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 100 | 50 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 300 | 150 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 500 | 250 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Fee (\$) | Small Entity Fee (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 200 | 100 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 130 | 65 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 160 | 80 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 600 | 300 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 0 | 0 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 2. EXCESS CLAIM FEES Fee Description Each claim over 20 (including Reissues) 50 Each independent claim over 3 (including Reissues) 200 Multiple dependent claims 360 | | | | | | | Small Entity Fee (\$) 25 100 180 | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Claims 28 - 20 = Extra Claims 8 x Fee (\$) 50.00 = Fee Paid (\$) 400.00 Indep. Claims 5 - 3 = Extra Claims 2 x Fee (\$) 200.00 = Fee Paid (\$) 400.00 | | | | | | | Multiple Dependent Claims Fee (\$) Fee Paid (\$) _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 3. APPLICATION SIZE FEE If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). <table border="1"> <thead> <tr> <th>Total Sheets</th> <th>Extra Sheets</th> <th>Number of each additional 50 or fraction thereof</th> <th>Fee (\$)</th> <th>Fee Paid (\$)</th> </tr> </thead> <tbody> <tr> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> <td>_____</td> </tr> </tbody> </table> | | | | | | | | Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) | _____ | _____ | _____ | _____ | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| Total Sheets | Extra Sheets | Number of each additional 50 or fraction thereof | Fee (\$) | Fee Paid (\$) | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| _____ | _____ | _____ | _____ | _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |
| 4. OTHER FEE(S) Non-English Specification, \$130 fee (no small entity discount) Other (e.g., late filing surcharge): 1253 Extension for response within third month 1,020.00 1801 Request for continued examination (RCE) (see 37 ... 790.00 | | | | | | | Fees Paid (\$) _____ | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | | |

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| SUBMITTED BY Signature  Name (Print/Type) John W. Branch | | Registration No. (Attorney/Agent) 41,633 Telephone (206) 262-8900 Date December 15, 2005 |
|--|--|--|

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